

## PART B - FEE(S) TRANSMITTAL

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Pfizner, Inc. P. O. Box 1027 Chesterfield, MO 63006				I hereby certify that States Postal Service addressed to the M transmitted to the US	ertificate of Mailing or Tran this Fee(s) Transmittal is bein with sufficient postage for fir all Stop ISSUE FEE address PTO (571) 273-2885, on the	g deposited with the United state class mail in an envelope above, or being facsimile date indicated below.	
				Karel J.		(Depositor's name) (Signature)	
				October I	14,2005	(Date)	
APPLICATION NO.	FILING DATE	. 1	FIRST NAME	DINVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/797,350	03/10/2004	Christine		Moore	3300/3 US	4279	
TITLE OF INVENTION: METHODS	METHODS FOR SELECT	ITVELY REMOV	ING COUN	TERIONS FROM COMPO	JNDS AND COMPOUNDS	DERIVED FROM SUCH	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	10/20/2005	
EXAM	ART UNIT		CLASS-SUBCLASS	· ·			
ZUCKER	1621		562-557000	_			
. Change of correspondence address or indication of "Fee Address" (37 I'R 1.363).  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, akernatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent. If no name is listed, no name will be printed.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified patent attorneys or agent is identified below. The patent is identif						B. Polster, II s Ashbrook document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Pfizer, Inc. P.O. Box 1027 chesterfield, MO 63006 USA							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
a. The following fee(s) are			Payment of		· ·		
A check in the amount of the fee(s) is enclosed.  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 5  Advance Order - # of Copies 5  Deposit Account Number 19-11/25 (enclose an extra copy of this form).							
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.							
NOTE: The Issue Fee and P	ublication Fee (if required) ords of the United States Pat	vill not be accepted	. from anyons	e other than the applicant; a re	gistered attorney or agent; or t	ation identified above. the assignee or other party in	
Authorized Signature July 73- 700-A Date October 11, 2005							
Typed or printed name Philip B. Polster, II Registration No. 43864						91025	

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